

Martin J. O'Malley
Governor



Gloria Lawlah
Secretary

Anthony G. Brown
Lt. Governor

DEPARTMENT OF AGING

Long-Term Care Ombudsman Program FACT SHEET June 2014

Authority: Annotated Code of Maryland, Title 10 – Human Services – Sections 212-214 Older Americans Act, including the requirements of 42 U.S.C. § 3058G

Protecting the rights and promoting the well-being of residents of long-term care facilities

The Ombudsman Program serves 47,000+ people in 233 Nursing Homes and 1389 Assisted Living Facilities through:

- The Office of the State Long-Term Care Ombudsman at the Maryland Department of Aging with a State Ombudsman and Ombudsman Specialist
- 19 Local Programs (36 FTEs) located in Area Agencies on Aging
- 146 volunteers contributing \$623,747 worth of time (94 certified)

In FY13, the Long-Term Care Ombudsman Program provided:

- 11000+ Facility visits
- 10580 Consultations to individuals
- 323 Community Ed. Sessions
- 544 Meetings with resident councils
- 2873 Complaints addressed
- 5517 Consultations to facilities
- 159 Meetings with family councils
- 267 Participation in long-term care facility surveys

Sources of complaints:

- Residents – 36%
- Relative/Friend – 36%
- Other – Non relative guardian, bankers, clergy, public officials, other agencies
- Anonymous – 12%
- Facility /Staff – 5%

Most frequent complaints handled in Nursing Homes:

1. Discharge/eviction – planning, notice, procedures, abandonment
2. Care Plan/resident assessment – inadequate, failure to follow plan or physician's orders
3. Dignity, respect- staff attitudes
4. Failure to respond to requests for assistance – call bells, etc.
5. Medications- administration, organization
6. Personal Hygiene - includes nail care and oral hygiene, dressing and grooming
7. Accident or injury of unknown origin – falls, improper handling, etc.
8. Symptoms unattended, including pain
9. Exercise preference/choice and/ or civil/religious rights, individual right to smoke
10. Therapies – physical, occupational, speech

Most frequent complaints handled in Assisted Living Facilities:

1. Discharge/ Eviction Discharge/eviction – planning, notice, procedures, abandonment
2. Medications- administration, organization
3. Food service – quantity, quality, variation, choice, condiments, utensils, menu
4. Physical Abuse
5. Billing/charges-notice, approval, questionable accounting wrong or denied
6. Dignity, respect – staff attitudes
7. Exercise preference/choice and or/ civil/religious rights, individual rights to smoke
8. Equipment/building – disrepair, hazard, poor lighting, fire safety, not secure
9. Accident or injury of unknown origin
10. Shortage of staff

Program Improvements:

MDoA retained independent, national experts to thoroughly examine the Ombudsman Program and offer recommendations for improvement. Since the completion of their report in 2009, MDoA has undertaken a significant retooling of the Long-Term Care Ombudsman Program. While more work remains to be done, there has been measurable progress toward improving and enhancing this program. Accomplishments include:

- The passage of legislation submitted by the Department to align the Federal and State Ombudsman statutes in 2010,
- Hiring of a State Ombudsman and Ombudsman Specialist (a new professional position in the Office of the State Long-Term Care Ombudsman),
- Establishment of a Stakeholder’s Group in 2011 to provide input on barriers and strategies and a Coordination Team to provide ground level guidance,
- Certification requirements established and completed by all employed and volunteer Ombudsmen including special training sessions, exams, and on-line national curriculum in 2013/2014,
- State and Local Ombudsman involvement in statewide groups addressing long-term care issues,
- Implementation of a workload-based funding formula to allocate local ombudsman funds based on number of nursing homes, number of facility beds, and geographic size of the local program, and
- Expansion of the volunteer component from 98 to 146 volunteers.

State Ombudsman Goals:

- 1) Provide the resources needed to ensure that the Maryland Long-Term Care Ombudsman Program is operated consistently with Older American’s Act provisions and operating consistently within and between the local ombudsman programs.
- 2) Advocate with and on behalf of Maryland residents who live in long-term care facilities.
- 3) Promote quality of care and quality of life for residents including those with dementia through training, consultations, highlighting successful practices, and public policies that support resident-centered care.

This Fact Sheet summarizes the FY13 data submitted to the Administration for Community Living. For more information contact Alice H. Hedt, State Long-Term Care Ombudsman, alice.hedt@maryland.gov, 1-800-243-3425 (toll free in Maryland) or 410-767-1100